THE MINISTER OF STATB IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) to (c) The position is that CGHS beneficiaries have been broadly divided into serving government servants and pensioners. While the former are required to directly purchase the non formulary medicines prescribed by specialists directly from any local chemist and then claim reimbursement of the expenditure involved from the service head of their department/office, the pensioners would continue to get such medicines from the dispensaries, as in the past. The change of procedure in respect of serving government servants has been made in view of the budgetary constraints of CGHS and to ensure that the pensioners get the required medicines without any delay.

(b) No, Sir.

(c) Does not arise.

Use of Morphine Derivatives in Pharmaceuticals Industries

3902 SHRI SATISH PRADHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the names of the Morphine derivatives used in pharmaceuticals Industries;

(b) whether Codin Phosphate has been regularly used as analgesic and cough suppressor;

(c) whether Government have stipulated the quantum of Codin to be used in medicines widely prescribed or over the counter issue;

(d) whether it is a fact that use of Codin admixtured medicines is on increase, since it gives intoxicative effects; and

(e) whether Government will bring drugs containing Codin under scheduled drugs to be issued on prescription only?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) The names of the morphein derivative commonly used in pharmaceutical formulation are given in the enclosed statement, *(see* below)

(b) Codeine phosphate is used in the form of linotus for the relief of Cough and as tablets for the relief of mild to moderate pain.

(c) Yes, Sir.

(d) Except for reported misuse of Codeine formulations in some parts of the North Eastern States, there are no such reports of misuse from other parts of the country.

(e) Codeine is already covered under Schedule "H' of the Drugs & Cosmetics Rules and is required to be sold against the prescription of the Registered Medical Practitioner.

Statement

List of Morphein Derivatives commonly used in pharmaceutical formulations

1) Methylmorphine (Codeine)
2) Hydrocodone
3) Nalorphine
4) Buprenorphine
5) Dihydrocodone
6) Phalcodine
7) Ethylmorphine

Information by State about cases of Pesticide Poisoning

3903. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Governemnt' s attention has been drawn to the case of pesticide poisoning at Jawahar Lal Nehru University and the notice issued to the JNU by Peoples Rights Organisation, Delhi for damages caused, as reported in " "Atnrit Bazar Patrika" of 12th July, 1994;

(b) whether this case was reported to the Ministry of Health by Delhi Administration, as required under the Insecticide Notification; if so, details thereof; and

(c) whether all the States have started providing correct and full information on cases of pesticide poisoning as required under the Act; and if so, full details thereof for last three years, indicating the cases genderwise and for different age groups showing the pesticides

involved and source of contact through water, food, soil, air etc.?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) to (c) Tje information is being collected and will be laid on the Table of the House.

Effect of Pesticides on Eyes

3904. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that pesticides are a frequent cause of eye diseases in India (as reported in Times of India of 25th July, 1994) and if so, full details thereof, Statewise during last three years; and

(b) which are the pesticides implicated • frequently and whether these are under close watch for an eventual ban?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) No, Sir.

(b) Does not arise.

Assistance to Karnataka for controlling Malaria

3905. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to suite:

(a) whether the Central Government has received any proposal from Government of Karnataka for assistance in control of Malaria in 50 problematic PHCs in that State;

(b) whether it is a fact that the Central Government has not been meeting the State's demand for antimalarial drugs like DDT, Nalafhipn and Primaquine tablets and has also abruptly stopped cash assistance for malaria eradication programmes in the State; and

(c) whether Government would take note of the vast destruction caused by recent floods in the State and rush medical supplies and assistance to prevent spreading of diseases among the vulnerable section?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) Yes, Sir.

(b) The Central Government has been generally supplying insecticides and drugs as per State Government requirement. Cash assistance has been discontinued uniformly but all Slates including Karnataka continue to receive central assistance in the form of commodity grant for the programme.

(c) The Government has already taken steps to supply essential medicines to the affected areas. Senior officers from Delhi have visited the State to oversee the situation and provide technical guidance. The Regional Director, Bangalore has been directed to closely monitor the situation.

मलेरिया के संपूर्ण उन्मूलन हेतु कदम उठाया जाना

3906. **श्री चिमनभाई हरिभाई शुक्ल:** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि:

(क) क्या देश में मलेरिया उन्मूलन का राष्ट्रीय कार्यक्रम विश्व स्वास्थ्य संगठन के आग्रह पर आरंभ किया गया था;

(ख) यदि हां, तो यह कार्यक्रम कितने वर्षों तक चलाया गया और इसके उद्देश्य क्या हैं;

(ग) राष्ट्रीय मलेरिया उन्मूलन कार्यक्रम के अंतर्गत अब तक कितनी प्रगति हुई है;

(घ) गत तीन वर्षों के दौरान इस कार्यक्रम पर कुल कितनी धनराशि खर्च की गई;

(ङ) देश में प्रति वर्ष मलेरिया के कितने नये मामलों का पता लगाया जाता है; और

(च) सरकार देश में मलेरिया का संपूर्ण उन्मूलन सुनिश्चित करने के लिए क्या कदम उठाने का विचार रखती है?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्री. सी. सिल्वेरा): (क) और (ख) देश में मलेरिया उन्मूलन के मुख्य उद्देश्य से विश्व स्वास्थ्य संगठन के तकनीकी मार्गदर्शन के अन्तर्गत राष्ट्रीय मलेरिया उन्मूलन कार्यक्रम वर्ष, 1958 में देश में शुरू किया गया था। यह कार्यक्रम तब से चल रहा है।

(ग) इस कार्यक्रम के अन्तर्गत विभिन्न उपायों को अपनाने से मलेरिया रोगियों की संख्या वर्ष 1976 में 6.47 मिलियन रोगियों की तुलना में 1984 में घटकर 2.18 मिलियन तक नीचे आ गई है।